

**NEWTON PARKS AND RECREATION DEPARTMENT
NASHOBA VALLEY SKI AND SNOWBOARD PROGRAM REGISTRATION - 2014**

Tuesday Afternoon Ski and Snowboard Program for Grades 3 – 5

Join us for our six week learn to ski and snowboard program on Tuesday afternoons starting January 7, 2014. The bus leaves the Albemarle Field House at 1:30 PM and returns at 5:30 PM.

Friday Evening Ski and Snowboard Program for Grades 6 - 12

Join us for our six week learn to ski and snowboard program on Friday evenings starting January 3, 2014. The bus leaves the Albemarle Field House at 6:00 PM and returns at 10:00 PM

Each program provides coach bus transportation from Newton to the Nashoba Valley Ski Area in Westford, MA. Participants that already know how to ski or snowboard may sign up for the lift ticket only option, all others should sign up for ski or snowboard lessons. In order to make our lesson times, the bus leaves promptly at the times listed above. Please arrive at least 15 minutes prior to the scheduled departure time. If you miss the bus you may drive to Nashoba Valley and meet us there.

Parent/Guardian _____ Phone _____
Email _____ Phone _____
Address _____ City _____ Zip _____
Child 1 Name: _____ Grade _____ Option _____
Child 2 Name: _____ Grade _____ Option _____

OPTIONS: Lift Ticket Only - \$250.00 Ski Lessons - \$275.00 Snowboard Lessons - \$275.00
Non residents add \$25.00 to above prices

CHECK ONE: _____ I need rentals from Nashoba Valley and will pre-fit in Newton
_____ I do not need rentals

RENTAL INFORMATION (OPTIONAL)

If you would like to rent equipment from Nashoba Valley, a **pre-fit** is scheduled for **December 12, 2013, 6:30 – 7:30PM** at the Albemarle Field house, 250 Albemarle Rd, Newton, MA 02460. Rental costs (skis, boots, and poles for skiing and snowboard and boots for snowboarding) for the six week program are \$100.00 and is due the day of the fitting. Helmets may be rented for \$40. **Checks for rentals should be made payable to: NASHOBA VALLEY (AND ARE DUE AT THE FITTING)**

IMPORTANT: All correspondence will be done via e-mail. This will include confirmations, reminders, cancellations, etc. For more information please contact Channon Ames at (617) 796-1529 or came@newtonma.gov

PAYMENT:

Checks or Credit Card Payments for the **PROGRAM ONLY** should be mailed with your registration to: Skiing, 124 Vernon St. Newton, MA 02458 Please make checks payable to: **CITY OF NEWTON**

ON-LINE REGISTRATION IS AVAILABLE AT: WWW.ACTIVITYREG.COM Click on Massachusetts, Newton Parks and Recreation, Register, Recreation Programs and Activities, Skiing

Credit Card Payment Form (Visa or Mastercard Only)

Last Name	First Name	Home Phone	Work Phone
			\$
Street	City	State	Zip Code
		Visa	Master Card
Credit Card Number	Expiration Date		

**NEWTON PARKS AND RECREATION DEPARTMENT
NASHOBA VALLEY SKI AND SNOWBOARD PROGRAM RELEASE**

Child 1 _____ School _____ Grade _____ DOB _____

Eye Color _____ Hair Color _____ Gender _____

Height _____ Weight _____ Identifying Marks _____

Medications/Allergies/Health Concerns _____

Child 2 _____ School _____ Grade _____ DOB _____

Eye Color _____ Hair Color _____ Gender _____

Height _____ Weight _____ Identifying Marks _____

Medications/Allergies/Health Concerns _____

Parent/Guardian _____ Phone _____

Parent/Guardian _____ Phone _____

Address _____ City _____ Zip _____

Emergency Contact _____ Phone _____

Physician _____ Phone _____

Medical Insurance _____ Policy # _____

Newton Parks and Recreation Department Medical Release Form

I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child(ren) _____. However, if I cannot be reached, I hereby authorize the Newton Parks and Recreation Department or Nashoba Valley to transport my child to the nearest Hospital, or _____ Hospital via Emergency Vehicle, and to secure for my child(ren) the necessary medical treatment. I understand that designated staff members at Nashoba Valley are trained in the basics of First Aid and Cardio-Pulmonary Resuscitation, and I authorize them to administer immediate First Aid to my child(ren) when appropriate.

Signature of Parent(s)/Guardian(s)

Date

Parental Consent Release From Liability and Indemnity For Participation In The Newton Parks and Recreation Department's Nashoba Valley Ski and Snowboard Program

I/We, the undersigned parent(s) or guardian(s) of _____, a minor, do hereby consent to his/her participation in and field trips with the Nashoba Valley Ski and Snowboard Program. I/WE forever RELEASE, acquit, discharge and covenant to hold harmless the City of Newton, a municipal corporation of the Commonwealth of Massachusetts, and its successors, departments, officers, employees, servants and agents, of and from any and all actions, causes of actions, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damages which I/WE may now or hereafter have as the parent(s) or guardian(s) of said minor, and also all claims or rights of actions or damages which said minor has or hereafter may acquire, either before or after his/her participation in, and field trips with, the Nashoba Valley Ski and Snowboard Program. FURTHERMORE, I/WE hereby agree to protect the City of Newton and its successors, departments, officers, employees, servants and agents against any and all claims for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury to said minor in connection with his/her participation in, and field trips with, the said Nashoba Valley Ski and Snowboard Program and to INDEMNIFY, reimburse or make good to the City of Newton or its successors, departments, officers, employees, servants and agents any loss or damage or cost, including attorney's fees, the City of Newton or its representatives may have to pay if any litigations arise from said minor's participation in and field trips with, the said Nashoba Valley Ski and Snowboard Program.

Signature of Parent(s)/Guardian(s)

Relationship

Date

THIS FORM MAY NOT BE ALTERED